DECLARATION OF INVENTORSHIP AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MODULARIZED	ELECTRONIC I	DEVICE ASSEMBLY	ARCHITECTURE
The specification	of which	•	
(check one)	was filed on under Applica	<u>-</u>	and w
			(if applicable)
including the claims	s, as amended by an duty to disclose to	y amendment referred to	ts of the above-identified specification above. on which is material to Patentability
inventor's certificat	e listed below and	have also identified belo	any foreign application(s) for patent ow any foreign application for patent ication on which priority is claimed.
Prior Foreign App	lication(s)		
APPLICATIO	ON NUMBER	COUNTRY	FILING DATE

I hereby claim the benefit under 35 USC §120 of any United States application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 USC § 112, I acknowledge the duty to disclose to the Office information which is material to patentability as defined in CFR § 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

<u>APPLICATION NUMBER</u> <u>FILING DATE</u> <u>STATUS</u> (Patented, Pending, Abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Address all correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 02292 P.O. Box 747 Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 - Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first inventor	Cheng-Chung HSU			
Full name of sole or first inventor Inventor's Signature Residence Taipei, Taiwan	Date December 10, 2003			
Residence Taipei, Taiwan	Citizenship Taiwan, R.O.C.			
Post Office Address <u>Inventec Bldg., 66 Hou-Kang St., Shih-Lin District,</u>				
Taipei, Taiwan, R.O.				
-				
Full name of second inventor				
Inventor's Signature Date				
Residence	Citizenshin			
Residence Citizenship Post Office Address				
Full name of third joint inventor, if any				
Inventor's Signature	Date			
Residence	Citizenship			
Post Office Address				
Full name of fourth joint inventor, if any _				
Inventor's Signature				
Residence	Citizenshin			
Post Office Address				
Full name of fifth joint inventor, if any				
Inventor's Signature	Date			
Residence Citizenship				
Post Office Address				
Full name of givth joint inventor if any				
Full name of sixth joint inventor, if any	Date			
Inventor's SignatureResidence	Date			
Post Office Address	Citizensinp			
Post Office Address				